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arahan anaa	and at		uent, bureau, or			SA	PC 30	6 1	7		
Youcher prepared at(Give place and date)						СО	PY/ OF	٠.			
HE UNITED S	STATES, Dr.,		Payce's Acc	count No	623	1		_			
o	w=========		(Payee)								
			. (14,00)					_			
(Address) (City) (S					State)		UNIT PRICE		AMOUNT		
lo. and Date of Order	Date of Delivery or Service	schedul	mber of contrac formation deem	t or Federal si	pply	QUANTITY -	Cost Per		Dollars Ct		
		Cost								1,776.	99
		002									
YMENT:											
Complete 🔲									}		
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		<u> </u>	Use continuation Weight	on sheet(s) if nec	Government f	3/1 No	1		Total	1,776.	
					(Payee must NOT use				- 30 1 (O é	7	
certify that the above bill is correct and just and that payment has not been received.				· u ,	Differen	ce s	·			-	
25	X1A	(Sign original o									
ate			25X1 <i>A</i>	4			***********				
		required:						_	01	1,776	. 9
Per _	A101.	Ti Dat		Reg. No.			ature or init Date	als)	Invoice Rec'	ч 	
ontract No.					 				INVOICE FILE	<u> </u>	
		I certify that this	account is corre	ect and proper fo	or payment.					25X1	A
Approved for \$	1.776.9	7		CION	†				er)		
·			23/	SIGN DRIGINAL -ONLY	Title	Auth	itized	Certi	fying ()fficer	
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tle	ntracting (HIS FORM MUST BE EX			Date	noen witu	OUT WRITTEN A	CREEMENT	IN INV PORM		
	THE REVERSE OF 1	HIS FORM MUST BE EX	ECUIED WITE LO	CONSES ARE MADE	OR SERVICES SEC						
	ACCOU	NTING CLASSIF	CATION (App	ropriation Symi	ool must be sh	own; oth	er classificat	ion optic	onal)		
API	PROVED:										
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	Approving (fficer									
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Check No.		dated	, 19,				on Treasurer of the United States favor of payee named above.				
aid by {		, on			-			-	pujou m		

Standard Form No. 1035—Revised Form prescribed by Comptroller GA approved For Reliase 2000 64/for Europe 64-00960R000400070033-5 September 7, 1035 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal

CONTINUATION SHEET

No. and Date of Order	Date of	ARTICLES OR SERVICES	OUAN-	UNIT PRICE		AMOUNT	
	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	Cts.
		PAYROLL SYSTEM IV					
		Direct Labor Costs properly chargeable	to			,	
		Contract AlOl					
		for the period 11-21-55 thru 11-27-55					
		Week Ending 11-27-55				696	186
	25X1A					1,080	.13
		Total Labor, Overhead and Other Costs	-			:::1,776	
		Total habor, overhead and other costs	:			+,114	
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